F0200000387

TRANSMITTAL LETTER

TO: Registration Division of (nuary 18, 2002
SUBJECT:	PRO-SAFE FIRE RESPONSE SERVICES, INC.	
	(Name of corporation - must include suffi	ix)
Dear Sir or Madam:	,	
The enclosed "Appli "Certificate of Existe to transact business i	cation by Foreign Corporation for Authorization to Trangence", and check are submitted to register the above refeat in Florida.	nsact Business in Florida", erenced foreign corporation
Please return all corr	respondence concerning this matter to the following:	
	Ms. Deana Smith	
	(Name of Person) C JON H. ANDERSON, P.A.	000047893201 -01/22/0201108008 *****78.75 *****78.75
	(Firm/Company)	
	Post Office Drawer 6839	
	(Address)	
•	Lakeland, Florida 33807-6839	
	(City/State and Zip code)	
	(01), 01110 1111 111, 0010,	
For further informati	on concerning this matter, please call:	
Deana Smith	h _{at (} 863 ₎ 644-6478	<u> </u>
(Name of Pe		phone Number S
STREET ADDRESS Registration Section Division of Corporate 409 E. Gaines St. Tallahassee, FL 3239 Enclosed is a check f	Registration Section Division of Corpora P.O. Box 6327	FILED JAN 22 PH 9 CRETARY OF STALAHASSEE, FLOOr ations
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status Certified Copy	Service Status & 1/24 Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. PRO-SAFE FIRE RESPONSE SERVICES, INC.	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)	
2. <u>Georgia</u> 3. 58-2611970	÷
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. February 2, 1994 5. perpetual	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. upon qualification	
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 3001 SW 67th Avenue, Ocala, FL 34474	
(Principal office address)	
3001 SW 67th Avenue, Ocala, FL 34474	
(Current mailing address)	-
8. emergency and fire response training services (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Jon H. Anderson, Esquire	
Office Address: 4927 Southfork Drive	
Lakeland , Florida 33813 (City) (Zip code)	
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature) Jon H. Anderson, Esquire	I

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRE	Crors	
Chairman:	Gary T.C. Joice, Chief Executive Officer	
	30 Wood Road, Nobel, Ontario, Canada POGIG	
/ice Chair	man: Gary Farb, Chief Financial Officer	
Address: _	144 Front Street West, Suite 400, Toronto, Canada M5J2L	
- 	Gary T.C. Joice, Secretary	-
Address: _	20 14-3-7-3-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
-		
_		
3. OFFI	CERS	
resident:	Same as above	_
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ice Presid	ent:	
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reasurer:		•.
.ddress: _		: -
OTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.	
3. <u> </u>	Lay School	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	-
4	Gary T.C. Joice, Chief Executive Officer	
	(Typed or printed name and capacity of person signing application)	

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : K402800 DATE INC/AUTH/FILED: 02/02/1994 JURISDICTION : GEORGIA
PRINT DATE : 01/03/2002 FORM NUMBER

JON H. ANDERSON, P.A. JON H. ANDERSON 4927 SOUTHFORK DRIVE LAKELAND, FL 33813

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

PRO SAFE FIRE RESPONSE SERVICES INC. A GEORGIA PROFIT CORFORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

of Title 14 of the Official code of Secretary of State.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the

This certificate relates only to the legal existence of the above named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State

electronically transmitted, information is This issued and retified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox Secretary of State